

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 108

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Community Pharmacists Association - PAC

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF JOHN BARROW

Mailing Address 2141 B West Broad St

City Athens State GA Zip Code 30606

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.20804

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 Dixie Highway  
Suite F

City Erlanger State KY Zip Code 41018

Purpose of Disbursement  
cONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.20792

Date of Disbursement

07 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

JO BONNER FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 851232

City Mobile State AL Zip Code 36685

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: AL District: 01

Transaction ID: SB23.20788

Date of Disbursement

07 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....